

HEALTH SYSTEM REFORM TASK FORCE

UTAH LEGISLATURE

Thursday, August 21, 2008 • 8:00 a.m. • C250 State Capitol

Note: The audio portion of this meeting will be broadcast live over the Internet and an archived copy of the broadcast will be available at <http://www.le.utah.gov/asp/interim/Commit.asp?Year=2008&Com=TSKHSR>. Background materials bill posted at this same site as they become available.

Approximate
Time Frame

8:00 1. Committee Business

- Call to order
- Approval of the minutes of the June 19, 2008 meeting

8:05 2. Personal Responsibility

The Task Force will review examples of initiatives to promote wellness through individual responsibility.

- Ms. Catherine J. Dupont, Associate General Counsel — Wellness program guidelines under HIPAA
- UnitedHealthcare — Wellness program incentives
- Regence BlueCross BlueShield of Utah — Wellness program incentives
- Health Behavior Innovations — Wellness program for employers

9:15 3. Maximizing Tax Advantages

Section 125 plans have been proposed as a tool to facilitate the aggregation of health insurance payment sources and the portability of plans. The Task Force will be briefed on the existing and potential uses of this mechanism and related legal and policy issues.

- Ms. Juliette Tennert, Chief Economist, Governor's Office of Planning and Budget
- Ms. Catherine J. Dupont, Associate General Counsel

10:00 4. Health Insurance Reform

Several groups will respond to the call by the Utah business community and 2008 H.B. 133 for significant health care reform and outline their visions of what a reformed system of health care in Utah might look like. The Task Force will consider draft legislation recommended by the respondents.

- Community — Report from Representative David Litvack
- Insurers — Report from Representative James A. Dunnigan

11:30 5. Optimizing Public Programs

The Task Force will follow up on two issues discussed at its June 19 meeting and review initiatives to increase enrollment in private insurance and public coverage, promote personal responsibility, and reduce spending on high cost cases.

- Utah Department of Health
 - Medicaid 1115 waiver development
 - Medicaid coverage of specialty conditions (e.g., autism)

11:45 6. Other Business

12:00 7. Adjourn